

Application Data Sheet

Application Information

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|----------------------------------|--|
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | FLUID COLLECTION POUCH MADE OF FLEXIBLE PLASTIC MATERIAL FOR SURGICAL DRAPES OR TOWELS |
| Attorney Docket Number:: | 1501-1292 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 5 |
| Small Entity?:: | No |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

10/529770

JC17 Rec'd PCT/PTO 30 MAR 2005

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: ANGELICA
Middle Name::
Family Name:: MALMBERG
Name Suffix::
City of Residence:: KUNGSBACKA
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing HAKANSKARSGATAN 60
Address::
City of Mailing Address:: KUNGSBACKA
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-434 00

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: KATARINA
Middle Name::
Family Name:: LAGER
Name Suffix::
City of Residence:: GOTEBOG
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing OVRE BURASLIDEN 9A
Address::
City of Mailing Address:: GOTEBOG

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-412 64

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

| | |
|-------------------------|-------|
| Representative Customer | 00466 |
| Number:: | |

Domestic Priority Information

| | | | |
|------------------|----------------------|-------------------------|-------------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | National Stage of | PCT/SE03/01351 | 9/1/03 |
| | | | |

Foreign Priority Information

| | | | |
|-----------|-------------------------|---------------|-----------------------|
| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
| SWEDEN | 0202870-2 | 9/30/02 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::